Name in Full Hannah R Brown

Certificate of Death

Died at Town unity P.O. County Montg Co MARYLAND

Date 1899 Month July Day 16 | Age Y. 71 M. D. | Native of Montg Co | Occupation Wife of carpenter

Male — White — Married — Widow — Divorced

Female — Colored — Single — Widower — Number of children living three

Husband of Wife Robt. Brown

Father's Name So not know

Mother's Name " " "

Cause of Death: Primary Catarrhal Bronchitis — How long sick So not known

Immediate Senility 70 — Accident, Suicide, Homicide

Reported by Dr H. G. Skinner

Address unity [redacted] PO

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Date copied from Undertaker's certificate

Name in Full Leonora L. Culver.

Certificate of Death

Died at Town Capitol View County Montgy MARYLAND

Date 1899 Month July Day 20 Age Y. 1 M. - D. 1 Native of Washtn Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife x

Father's Name Frank E Culver Mother's Name Gertrude Recker

Cause of Death Primary Acute Cerebral Meningitis How long sick 5 days

Immediate Convulsion 39a ~~Accident, Suicide, Homicide~~

Reported by Dr Wm L. Lewis

Address Kensington Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full #6291 Certificate of Death

Susie Davey

Died at Town Rockville County Montgomery MARYLAND

Date 1899 Month 7 Day 20 | Age Y. 14 M. D. | Native of | Occupation

~~Male~~ White Married Widow Divorced

Female ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name

Copy

Mother's Name Susan Licklider

Cause of Death: Primary 82 | How long sick

Immediate Cholera Infantum | Accident, Suicide, Homicide

Reported by E. E. Stonestreet

Address Rockville, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full Babe Day

Certificate of Death

Died at Town: Gaithersburg County: Montgomery MARYLAND

Date 1899 Month: July Day: 29

Age Y. 2 M. D.

Native of Gaithersburg

Occupation Baby

~~Male~~ Female

White ~~Colored~~

~~Married~~ Single

~~Widow~~ ~~Widower~~

~~Divorced~~

~~Number of children living~~

~~Husband~~ / Wife of

Father's Name Hezekiah Day

Mother's Name

Cause of Death — Primary: Cholera Infantum — How long sick: 1 week

Immediate: " — " — ~~Accident, Suicide, Homicide~~

82 OVER

Reported by J. C. Brown Undertaker OVER

Address Rockville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70008

Attended by Dr. E C Atkinson

of Gaithersburg Md

He did not attend this child

Seen by Coroner

of

Information contained in this certificate received from Hesekiah Day

of Gaithersburg Md

Name in Full Louisa Dorsey

Certificate of Death

Died ~~at~~ Town: Near Brookeville County: Montgomery MARYLAND

Date 1897 Month 7 Day 28 Age Y. 72 M. 3 D. 26 Native of Md. Occupation Sch

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 2

~~Husband~~ Wife of Emmanuel Dorsey 81

Father's Name Wm Powell Mother's Name Rachel Powell

Cause of Death: Primary / Immediate Gastritis (Chronic) How long sick Four weeks ~~Accident, Suicide, Homicide~~

Reported by Dr. W. F. Green

Address Brookeville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full

Certificate of Death

Henry Clay Hallowell

Town: Sandy Spring County: Montgomery

Died at Sandy Spring Montgomery MARYLAND

Date 1899 Month: 9 Day: 10 | Age Y. 70 M. 1 D. 3 | Native of Va. | Occupation Farmer

Male / ~~Female~~ | White / ~~Colored~~ | Married / ~~Single~~ | Widow / ~~Widower~~ | Divorced

Number of children living 7

Husband / Wife of Sarah M. Hallowell

Father's Name Benjamin Hallowell Mother's Name Margt. F. Hallowell

Cause of Death — Primary: Bladder and Kidney — How long sick 2 Years

Immediate: Septicemia 102 — Accident, Suicide, Homicide

Reported by Rogn Burke

Address Sandy Spring Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78708

Name In Full | Certificate of Death

Susie Dewey Lechlider

Died at Town: Dewood County: Montgomery MARYLAND

Date 1899 Month: July Day: 25th Age: ~~Y.~~ M. 14 ~~D.~~ Native of: Maryland Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living X

~~Husband~~ of ~~Wife~~

Father's Name: George Lechlider Mother's Name: Mary Lechlider

Cause of Death: Primary | How long sick

Immediate: Marasmus 82 | ~~Accident, Suicide, Homicide~~

Reported by: E E Stonesheet M.D

Address: Rockville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79808

Name in Full

Certificate of Death

Frank A. Leizear

Died at Town: Sandy Spring County: Montgomery MARYLAND

Date 189 9 Month: 7 Day: 27 Age: Y. 5 M. 8 D. 3 Native of: Maryland Occupation: Undertaker

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living one

Husband ~~Wife~~ of Mary Johnson Leizear

Father's Name: Perry Leizear

Mother's Name: ——

Cause of Death: Primary: Brights 97 How long sick: 8 months

Immediate: Convulsions

Accident, Suicide, Homicide

Reported by Roger Brooke

Address Sandy Spring Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70706

Name in Full Robert Lewis

Certificate of Death

Town Colesville County Montgomery MARYLAND

Died at

Date 1899 Month July Day 23 Age Y. 26 M. about D. Native of Md. Occupation Laborer

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name William Lewis Mother's Name Mary Lewis

Cause of Death { Primary Bullet Wound of abdomen
Immediate 4. 38 calibre bullet holes in the jejunum.

How long sick 14 hours

~~Accident, Suicide~~, Homicide

Reported by Augustus Stabler M.D. 1526

Address Brighton, Montg. Co [redacted] Maryland.

Autopsy made July 24th & testimony given before Coroner's jury.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full D. Charles J. Maddox

Certificate of Death

Died at Town Rockville County Montgomery MARYLAND

Date 1894 Month July Day 26th | Age Y. 79 M. 6 D. 26 | Native of Georgetown | Occupation Physician

Male / ~~Female~~ | White / ~~Colored~~ | Married / ~~Single~~ | ~~Widow~~ / Widower / | ~~Divorced~~ / Number of children living 4

Husband / ~~Wife~~ of Catherine J. Maddox

Father's Name 0 | Mother's Name 0

Cause of Death: Primary Cancer on face 25g | How long sick Seven months

Immediate Congestive Chill | Accident, Suicide, Homicide

Reported by Edward Anderson M.D.

Address Rockville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

James A. Marshall

Certificate of Death

Died at Town: Kensington County: Montg Co. MARYLAND

Date 189 9 Month: July Day: 7

Age Y. 65 M. - D.

Native of: England

Occupation: Minister

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 3

Husband ~~Wife~~ of Elizabeth Marshall

Father's Name X

Mother's Name X

Cause of Death: Primary Cancer of Stomach 2½ How long sick 2 yrs

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by W. L. Lewis M D

Address Kensington Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 05868

Name in Full — Elvira M Miles

Certificate of Death

Died at Gaithersburg — County Montgomery — MARYLAND

Date 1899 — Month 7 — Day 30 — Age Y. 90 M. D. — Native of Md — Occupation Lady

~~Male~~ Female — White ~~Colored~~ — Married ~~Single~~ — Widow ~~Widower~~ — ~~Divorced~~ — ~~Number of children living~~

~~Husband~~ Wife of Henson Miles

Father's Name

Mother's Name

Cause of Death — Primary: Dropsy — 1550 OVER — How long sick: 7 months

Immediate: Dropsy — Accident, Suicide, Homicide

Reported by

Address

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 76885

Attended by Dr. E C Etchison
Gaithersburg Md

Seen by Coroner

of

Information contained in this certificate received from Mrs Ella Walker
of Gaithersburg

Name in Full

Certificate of Death

Elizabeth S. Miller

Died at Town: Spencerville County: Montgomery MARYLAND

Date 1899 Month	Day	Age Y.	M.	D.	Native of	Occupation
~~Male~~ 7	21	—	4	16	Maryland	—

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single Widower Number of children living —

Husband / ~~Wife~~ of —

Father's Name: Robert H Miller

Mother's Name: Maryanna Miller

Cause of Death — Primary: Enterocolitis — How long sick: 8 weeks

Immediate: exhaustion

82

Accident, Suicide, Homicide

Reported by Roger Burke

Address Sandy Spring

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70708

Name in Full Maurice M Offutt

Certificate of Death

Died at Town Rockville County Montgomery MARYLAND

Date 1899 Month July Day 7 | Age Y. 1 M. 5 D. | Native of Rockville | Occupation 0

Male 1 White Married 0 Widow 0 Divorced 0

Female Colored 1 Single 0 Widower 0 Number of children living 0

Husband of Wife 0

Father's Name Rezin Offutt

Mother's Name Martha Offutt

Cause of Death: Primary Mal-assimilation. Immediate Diarrhea

How long sick 6 days

Accident, Suicide, Homicide

Reported by Edward Anderson

Address Rockville. Montgomery Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Harry Martine Raney

Died at Town Kensington County Montgy MARYLAND

Date 189 9 Month July Day 31 Age Y. — M. D. 14 Native of Md Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband / Wife of X

Father's Name Jas Raney

Mother's Name Annie Cuthbert

Cause of Death: Primary Inflammatory Diarrhoea — How long sick one week

Immediate Exhaustion 82 — ~~Accident, Suicide, Homicide~~

Reported by Wm L. Lewis M.D.

Address Kensington Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 60968

Name in Full: Annie Smith

Certificate of Death

Died at: Town: Bethesda County: Mont. Co. MARYLAND

Date 1899 Month: July Day: 30th Age: ~~Y.~~ M. 5 D. Native of: America Occupation:

~~Male~~ White ~~Married~~ Widow Divorced

Female ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name: Unknown Mother's Name: Unknown.

Cause of Death: Primary: Marasmus How long sick: During life

Immediate: Diarrhoea 82 Accident, Suicide, Homicide

Reported by: J W Chappell M D

Address: Tennalfton D.C.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Name in Full: Anna Stevens

Certificate of Death

Died Near Town Poolesville County Montgomery MARYLAND

Date 1899 Month July Day 17 Age Y. M. D. 4.5 Native of Occupation

~~Male~~ White ~~Married~~ Widow Divorced

Female ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name James Stevens

Mother's Name Susan Lowe

Cause of Death: Primary Meningitis

Immediate

How long sick 2 days

39a

Accident, Suicide, Homicide

Reported by B. W. Walling M.D.

Address Poolesville, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Walter Wallace

Died at Town near unity County Montgomery MARYLAND

Date 1899 Month July Day 18 | Age Y. 6 M. D. | Native of Maryland | Occupation

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ of ~~Wife~~

Father's Name Uriah Wallace Mother's Name Lucinda Wallace

Cause of Death Primary 82 How long sick few days

Immediate Cobra Infantum ~~Accident, Suicide, Homicide~~

Reported by G. W. Cashell Undertaker

Address Unity P.O. Montgomery Co Md

Must be signed by ~~physician~~, if any in attendance, otherwise by ~~coroner~~, undertaker or ~~minister~~.

LIBRARY BUREAU, 79998

9A

Attended by Dr. ~~None~~

of ——

Seen by Coroner ——

of ——

Information contained in this certificate received

from William Nettles

of Unity Md.

Name in Full Miss Sarah E. White

Certificate of Death

Died at Town Gaithersburg County Montgomery MARYLAND

Date 1894 Month July Day 7 | Age Y. M. D. over 70 Suppose | Native of | Occupation No occupation

Male / White / ~~Married~~ / ~~Widow~~ / ~~Divorced~~

Female / ~~Colored~~ / Single / ~~Widower~~ / ~~Number of children living~~

Husband of Wife

Father's Name Samuel White

Mother's Name Roseanna

Cause of Death: Primary - always very delicate | How long sick about a week

Immediate Diarrhoea 83 | ~~Accident, Suicide, Homicide~~

Reported by William A Waters MD

Address Germantown Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full Nellie Wood

Certificate of Death

Died at Town Chevy Chase County Montgy MARYLAND

Date 1899 Month July Day 23 Age Y. 38. M. D. Native of Mass. Occupation Housewife

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living One

Husband ~~Wife~~ of Wm A. Woods

Father's Name X

Mother's Name X

Cause of Death Primary Tubercular Enteritis

Immediate Exhaustion 22 a

How long sick 2 yrs.

~~Accident, Suicide, Homicide~~

Reported by Dr G. D. P. Bailey

Address Washington D.C.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968